SCHIFF HARDIN LLP

PATENT DEPARTMENT
6600 SEARS TOWER

233 SOUTH WACKER DRIVE

CHICAGO, ILLINOIS 60606

In respondication of:

Hoffmann et al

Serial No.:

10/840,114

GROUP ART UNIT: 2857

Filed:

May 6, 2004

EXAMINER: M. Baran

For:

"METHOD AND DEVICE TO TEST THE

CONFIRMATION NO.: 7271

OPERATION SAFETY OF A PROCESS CONTROL DEVICE"

PETITION FOR EXTENSION & AMENDMENT C

Commissioner for Patents

PO Box 1450

Alexandria, Virginia 22313-1450

SIR

Transmitted herewith is an amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below.

			CLAIMS AS AMEND	ED		· · · · · · · · · · · · · · · · · · ·
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	*17	MINUS	**20	x	() X 25.00 () X 50.00	
INDEP. CLAIMS	*2	MINUS	3	x	() X 100.00 () X 200.00	
	amended to contain dependent claims ly paid for.			(') YES	()\$180.00 ()\$360.00 ONE TIME	
			TOTAL ADDITIONA FOR THIS AMENDM			\$0.0

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

	A check in	the amount of \$	is attached.
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☐ A check for \$ accompanying IDS under 37 CFR 1.97(c) is	is attached
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SCHIFF HARDIN LLP (Customer Number: 26574)
Patent Department

BY		Mark	4	3	ess	2	
e is	being	deposited	with	the	United	States	Po

(45,877)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450 on May 1, 2006

	Mark Bergner	
	NAME OF APPLICANT'S ATTORNEY	
	Mah Beroner	
	SIGNATURE	
* *	May 1, 2006	
	DATE	

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Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated December 29, 2005 for one (1) months so that the period for response is extended to April 29, 2006. A check in the amount of \$120.00 is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.

[☐] A check for \$ _____ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.

The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed. When phoning re this application, please call (312) 258-5779.